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CONFIRMATION NO. 4769

SERIAL NUMBER 09/591,769	FILING OR 371(c) DATE 06/12/2000 RULE	CLASS 705	GROUP ART UNIT 3626	ATTORNEY DOCKET NO. 320715.02	
APPLICANTS Alain T. Rappaport, San Mateo, CA; ** CONTINUING DATA ***** This appln claims benefit of 60/140,102 06/18/1999 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/21/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u> </u> Examiner's Signature <u> </u> Initials <u> </u>		STATE OR COUNTRY CA	SHEETS DRAWING 16	TOTAL CLAIMS 56	INDEPENDENT CLAIMS 7
ADDRESS 69316					
TITLE METHOD, APPARATUS AND SYSTEM FOR PROVIDING HEALTH INFORMATION					
FILING FEE RECEIVED 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		